BEST AVAILABLE COPY

Effective October 1, 2000

Application or Docket Number 689318

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			65					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			65 minus 20=		. 45		,	X\$ 9=	405	OR	X\$18=	\$10)-
INDEPENDENT CLAIMS			4 minus 3 =		* /			X40=	40	OR	X80=/	80
MULTIPLE DEPENDENT CLAIM P			RESENT				 -		70	1	/	109
* If the difference in column 1 is less than zero, enter "0" in column 2							-135= 	TICIS	OR OR	+270= / TOTAL		
				IENDED - PART II				OTAL	1190	OR	OTHER	//600
		(Column 1)	(Column 2) (Column 3)			s	MALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	A Sur	HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA	f	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total //	· // //	Minus	** 6	5	= 49] ,	(\$ 9=	387. D	OR	X\$18=	
	Independent	* 18	Minus	*** (<i> </i>	= /4] ;	X40=	540,W	OR	X80=	
L	FIRST PRESE	NTATIÓN OF M	ULTIPLE DEF	ENDEN	CLAIM		」	135=		OR	+270=	
							L	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)			mn 2)	(Column 3))II. I'EL			ADDI1. 1 EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** .		=] >	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	」	K 40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDEN	T CLAIM		┛ <mark>┝</mark> ┰	135=		OR	+270=	
							L.	TOTAL		00	TOTAL	
(Column 1) (Column 2) (Column 3)								OIT. FEE		, - · ·	ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER	PRESENT EXTRA	1┌	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	<u></u>	(\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4114	=	,	〈40=		OR	X80=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=			+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	me mignest Num	bei Fieviously Pa	iu For (10tai of	maepeno	ent) is the	riignest numbi	ei iound	m me app	nopriate box	HII COI	umm 1.	